

3732
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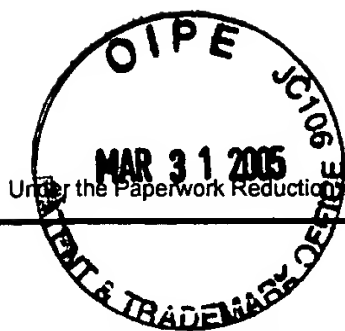
PTO/SB/21 (09-04)

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/929,826
	Filing Date	August 13, 2001
	First Named Inventor	Tierney et al.
	Art Unit	3732
	Examiner Name	M. Priddy
Total Number of Pages in This Submission	Attorney Docket Number	017516-003240US

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Townsend and Townsend and Crew LLP		
Signature			
Printed name	Mark D. Barrish		
Date	3/28/05	Reg. No.	36,443

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I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
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PTO/SB/83 (01-03)

Approved for use through 11/30/2005. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT

Application Number	09/929,826
Filing Date	August 13, 2001
First Named Inventor	Tierney et al.
Art Unit	3732
Examiner Name	M. Priddy
Attorney Docket Number	017516-003240US

To: Commissioner for Patents
Washington, DC 20231

I hereby apply to withdraw as attorney or agent for the above identified patent application.

The reasons for this request are: At the request of the client.

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- ☒ Change the correspondence address and direct all future correspondence to:

CORRESPONDENCE ADDRESS

☐ Customer Number

Place Customer Number
Bar Code Label here

OR

<input checked="" type="checkbox"/> Firm or Individual Name	Frank Nguyen, Vice President & General Counsel (E-mail: Frank.Nguyen@intusurg.com)				
Address	Intuitive Surgical, Inc.				
Address	950 Kifer Road				
City	Sunnyvale	State	CA	ZIP	94086
Country	USA				
Telephone	(408)-523-2129	Fax	(408)-523-1390		

- ☒ This request is made on behalf of myself and
- ☐ all the attorneys/agents of record.
 - ☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or
 - ☒ the attorneys/agents associated with Customer Number 20350

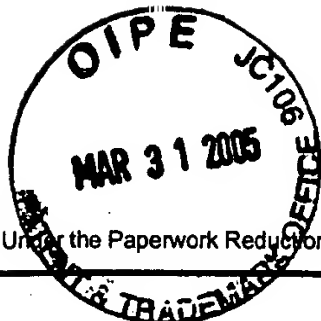
This request is enclosed in triplicate (including any attachments).

Name	Mark D. Barrish, Reg. No. 36,443, Townsend and Townsend and Crew, LLP
Signature	
Date	3/28/05

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Address	Intuitive Surgical, Inc.				
Address	950 Kifer Road				
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Country	USA				
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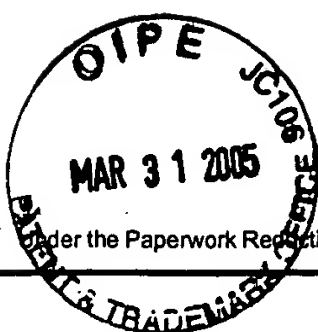
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<input checked="" type="checkbox"/> Firm or Individual Name	Frank Nguyen, Vice President & General Counsel (E-mail: Frank.Nguyen@intusurg.com)				
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This request is enclosed in triplicate (including any attachments).

Name	Mark D. Barrish, Reg. No. 36,443, Townsend and Townsend and Crew, LLP
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Signature	<i>Mark D. Barrish</i>
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Date	3/28/05
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